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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

		ΙΔtto	mey Docket Number	L	1
DECLARAT	ION FOR UTILI	TY OR			
	DESIGN	First	t Named Inventor	Mi thr	a M. K.V. Sankri
PATENT APPLICATION		N	First Named Inventor M: Thra M. K.V. San Kri		
(37 CFR 1.63)		Арр	lication Number	T	
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e specification of which		(Title of the Inve	ention)		
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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer Number:	OR 🔀	Correspondence address below			
Name Dr. Mit	ira Sankrit	hi				
Address 17602	Bothell Wo	y N.E.				
City Lake Fores	Bothell Wo t Park	1	^{ZIP} 98155			
Country U.S.A.			6.367.4180			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) M: thra M.K.V. Family Name or Sumame Sankr; th;						
Inventor's Signature Mi, Mm	a Sandrik		Date 3/28/2004			
Residence: City Lake Forest Park	State WA	Country U.S. A.	Citizenship India			
Mailing Address 17602 Bothell Way N.E.						
City Lake Forest Powk	State WA	ZIP 9819	Country U.S.A.			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Sumame	Ð			
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
City	State	ZIP	Country			
Additional inventors or a legal re	presentative are being named on the	supplemental sheet(s) PTO/SB	/02A or 02LR attached hereto.			

Sample Form (former PTO/SB/15) (08-03)

	Docket Number (Optional)					
ASSIGNMENT OF APPLICATION						
Whereas, I/We, Mithra Sankrithi of Lake For referred to as applicant, have invented certain new and useful improvements	rest Park, WA, hereafter in a "Pogo-Sk;"					
for which an application for a United States Patent was filed on						
Application Number						
for which an application for a United States Patent was executed on	Vlauch 28,2004, and					
Whereas, Invention Enterprises of Lake Forest Park, WA here referred						
Whereas, <u>Invention Enterprises of Lake Forest Park</u> , <u>WA</u> here referred to "assignee" whose mailing address is						
desirous of acquiring the entire right, title and interest in the same;						
Now, therefore, in consideration of the sum of	ion in the United States and the entire of therefore in the United States. I/We rk Office to issue said United States arme, for his sole use and behoof; and term for which said Patent may be ad this assignment and sale not been					
Note: Signatures of all the inventors or assignees of record of the entire interest or their represe more than one signature is required, See below.	entative(s) are required. Submit multiple forms it					
Total of forms are submitted.						